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Application Number

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TRANSMITTAL FORM

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(to be used for all correspondence after initial filing)

09/851,606 May 8, 2001 **Filing Date** Rubinah K. CHOWDHAR ECEIVED **First Named Inventor** 1615 Group Art Unit

G. Kishore **27301**2011700 Total Number of Pages in This Submission 10 Attorney Docket Number

ENCLOSURES (check all that apply)									
Fee Transm duplicate)	ittal Form (1 page, plus	Assignm (for an Ap	ent Papers plication)	After Allowance Communication to Group					
Fee A	ttached	Drawing(s)	Appeal Communication to Board of Appeals and Interferences					
Amendment	/Reply	Licensing	g-related Papers	X Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)					
After I	Final	Petition		Proprietary Information					
Affida	vits/declaration(s)	Petition t Application	o Convert to a Provisional on	Status Letter					
X Extension of plus duplication	f Time Request (1 page, te)		Attorney, Revocation of Correspondence Address	Other Enclosure(s) (please identify below)					
Express Aba	andonment Request	Terminal	Disclaimer	Response to Advisory Action Unde 37 CFR1.116 (3 pages) Notice of Appeal (1 page, plus duplicate)					
Information	Disclosure Statement	Request	for Refund						
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Response to Incomplete	o Missing Parts/ Application	Remarks							
Response to Missing Parts under 37 CFR 1.52 or 1.53		CUSTOMER NO. 25225							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm or Individual Name	MORRISON & FOERSTER LLP Kawai Lau - 44,461								
Signature	Tun								
Date	July 28, 2003								

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Dated: July 28, 2003 Signature:	Mil	_ (Diane Blevins)	

PTO/SB/17 (01-03)
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Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

Complete if Known 09/851,606 **Application Number** May 8, 2001 Filing Date Rubinah K. CHOWDHARY First Named Inventor **Examiner Name**

Date

July 28, 2003

G. Kishore RECEIVED 1615 Group Art Unit

TOTAL AMOUNT OF PAYMENT (\$) 215.00					Attorney Docket No. 2/3012011/00								
METHOD OF PAYMENT (check all that apply)							FEE	CALCUI	LATION (cor	ntinued)	AUG	0 4 ₂₀₀₃	
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1003 520	2003	260	Plant filing fee		1402	320	2402	160	Filing a bri	ef in support of	f an appeal		
1004 750	2004	375	Reissue filing fee		1403	280	2403	140	Request fo	or oral hearing			
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SUBMITTED BY								Complete (i	if applicable)		j		
Name (Print/Type) Kawai Lau					ration No.	44	1,461		Telephone	(858) 720-51	78	İ	
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Signature